> Guidance Per Section of the Metrics Report

<u>Reporting Information</u>

Reporting Period – select the month being reported (each month should be reported separately)

Date Submitted – the date the report is submitted to OKHBIE

<u>Organization Information</u>

Identifier – enter your organization's name

Organization Administrator- enter your title / last name / first name

<u>Section 1: Coverage Model</u>

# of Applications Started- number of applications started for residents of this county that do not currently have coverage or are completing a new application through healthcare.gov

# of Applications Completed Medicaid Eligible- number of Medicaid applications completed during the report month for clients that do not currently have coverage. (these may have been started previously)

# of Applications Completed QHP Eligible- Number of QHP applications completed during the report month for clients that do not currently have coverage, or are enrolled through healthcare.gov for the first time. (These may have been started previously, and completed means eligibility determined and not necessarily enrolled)

# of Applications In-Progress (Outstanding as of last day of reporting period)-number of applications you are working on that have not been completed yet. They may have been started in a previous month.

# of Medicaid Renewals (this # is included in the month that the renewal was confirmed, NOT the renewal effective date)- Number of Medicaid renewals completed during the report month. It counts as a renewal if the client still had benefits at the time of renewal. If they had been terminated, it is a new application. Renewals are reported in the month they are completed, which may not be the month they are started.

# of QHP Renewals (this # is included in the month that the renewal was confirmed, NOT the renewal effective date month)- number of QHP renewals completed during the report month (will be zero until next open enrollment period since all QHP apps are on healthcare.gov and count as new apps)

Section 2: Focus

# of Enrollment Related Contacts- number of case related contacts. At minimum this will be the sum of your applications started plus renewals. Also include "case work" for example, reporting a change, uploading documents, etc.

 # Hours spent on enrollment assistance- time spent on enrollments or follow-up activities

# of referrals sent by type of referral- referrals sent to other entities, seven entity categories (including "Other") are listed in order to provide greater detail

# of referrals received- referrals received from any source, including the call center

Section 3: Outreach & Enrollment

# of appointments with consumers- number of appointments by consumer's county of residence

# of direct (phone or in-person contacts with consumers)- number of all direct contacts including enrollment and other outreach and education related contacts by county

# of follow-up calls made to consumers- number of follow-up calls an assister makes for each consumer's county of residence

Section 4: Operations

# of reported privacy and security breaches- if consumer PI is compromised, this form should not be the first time a privacy or security breach is reported. Any privacy or security breaches should be reported to your program coordinator immediately and then accounted for on this form.

Section 5: Talent Management

# of CACs Trained & Certified- enter total number of staff that are trained and certified as of that month by corresponding county line of where their home office is located.